

**Medtronic**

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## Facsimile Cover Sheet

### MEDTRONIC LAW DEPARTMENT - CONFIDENTIAL

**Attention:** Centralized Fax Number  
**Company:** United States Patent and Trademark Office  
**Telephone:** 703-305-5261  
**Facsimile:** 703-872-9306  
**Application No.:** 10/004,732  
**Filing Date:** November 9, 2001

**From:** Anna M. Nelson, Esq.  
**Telephone:** 763-505-0409  
**Facsimile:** 763-505-0411  
**Our Ref. No.:** P-10110.00US

**Date:** February 3, 2005

**Pages (including cover page):** 7

**Comments:**

Enclosed are the following documents for filing in the above-identified application:

- ☒ Transmittal Letter
- ☒ Response to Office Action
- ☒ Authorization to charge Deposit Account

Anna M. Nelson, Esq.  
Reg. No. 48,935

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PATENT

Docket No.: P-10110.00

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Swoyer et al. Group Art Unit: 3762  
Application No.: 10/004,732 Examiner: Bradford, Roderick D.  
Filing Date: November 9, 2001 Due Date: April 16, 2004  
For: IMPLANTABLE MEDICAL ELECTRICAL STIMULATION LEAD FIXATION  
METHOD AND APPARATUS

**CERTIFICATE OF MAILING OR TRANSMISSION:** I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on February 3, 2005

  
Jodi Nickel

## TRANSMITTAL LETTER

Mail Stop: Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

We are transmitting herewith the attached:

- ☒ Response to Office Action  
☐ Petition for Extension of Time  
☐ Return Receipt Postcard

FEE CALCULATION	No. of Claims Filed	Highest No. of Claims Previously Paid for	No. of Extra Claims	Rate	Fee
Total Claims		- =		x \$18	\$
Independent Claims		- =		x \$84	\$
Multiple Dependent Claims				+ \$280	\$
TOTAL					\$

- ☒ Please charge Deposit Account No. 13-2546 \$ for additional claims fees and \$ for petition fees, for a **TOTAL OF \$**
- ☒ Please charge any additional fees or credit any overpayments to Deposit Account No. 13-2546, which may have been overlooked on this Transmittal Letter with regard to this filing. A duplicate of this Transmittal Letter is enclosed.

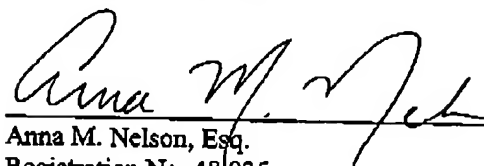
**Transmittal**

**Application No.: 10/004,732**

**Page 2**

Respectfully submitted,

Date: February 3, 2005



Anna M. Nelson, Esq.

Registration No. 48,935

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PATENT  
Docket No.: P-10110.00

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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In re Application of:	Swoyer et al.	Group Art Unit:	3762
Application No.:	10/004,732	Examiner:	Bradford, Roderick D.
Filing Date:	November 9, 2001	Due Date:	February 3, 2005
For:	IMPLANTABLE MEDICAL ELECTRICAL STIMULATION LEAD FIXATION METHOD AND APPARATUS		

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Jodi Nickel

Mail Stop: Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

**RESPONSE TO OFFICE ACTION****Introductory Comments**

Responsive to the Office Action mailed November 3, 2004, Applicants submit the following remarks.

**Remarks/Arguments** begin on page 2 of this paper.